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ABSTRACT

An experienced community health worker describes her experiences in the field as a basis for recommended guidelines for the role, philosophy, aims, and goals of community health workers. The role of the community health worker as a member of the health care team is explored, and the problem of recognition for community health workers is considered along with the need for and problems involved with continuing education. The author offers some attitudinal and behavioral guidelines for facilitating continued study in the health care field based on her own described developmental experience. In conclusion, concrete suggestions are presented for community health workers to organize and gain recognition. Appendixes consist of a community health worker pledge, self-evaluation forms, a community health worker job description and title definition, recommended readings, and a description of the West Valley College community health worker associate degree program. (NJ)

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COMMUNITY HEALTH WORKER HANDBOOK

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by Aurora Rodriguez Perales

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Health Services Education Council
San Jose, California
June, 1975

Dedicated To

My Family
and
Community Health Workers Everywhere

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INTRODUCTION

The reason for this handbook is to help individual Community Health Workers "find" themselves. It was written by a Community Health Worker who has been working with Community Health Workers in the last few years. I know it might not meet the expectations of all, but I trust will help some.

Books that are written to educate usually are tight little packages of indisputable facts. This book is different. What you will gain from it cannot be said exactly. Much depends on your feelings, your interests and your past and present experiences.

You can talk, argue, play or relax with this book. It is meant to be like a gift, a message or a letter to a very special friend. It should be treated as such.

You are invited to be a research scientist for a day- an investigator of your life. I hope you will find out (1) What you want and (2) How you might get what you want. Like a scientist you can then apply this new knowledge to your daily work.

Hopefully you will see yourself as equal with all in the race for life, not forgetting that our Creator is the unseen partner in all our work.

Aurora Rodriguez Perales

YOU AS A COMMUNITY HEALTH WORKER

The Community Health Worker, as the name implies, is a community person trained to work on the health team. I, like most of you, came from the community which we now serve, with little or no skills or knowledge in the health field. We were trained to work with doctors, nurses, and other health team members to assist them in Preserving, Protecting and Restoring a patient's health.

The Community Health Worker on the health care team is like the nerve and connective tissues in our bodies. The nerve tissue carries messages to different systems in our bodies in order for them to carry out their functions; the connective tissues give support to the body as a whole. Each of our body systems has various functions of other systems. When all systems are working co-operatively we have a healthy human body, with the ability to perform tasks and work with other people.

What I am trying to stress is the importance of teamwork. We are part of the health team. We each have different functions (duties) to perform, but without the proper backup of other professionals in the team, we are like a limb chopped off a tree, or like a building without a foundation. Both things are useless for lack of being a part of the whole system.

Teamwork means that everyone on the team knows what they are supposed to do and does it to the best of individual ability with a spirit of cooperation. In order to understand what the Community Health Worker

means to the health care team we must first understand that each person on the team has individual needs, priorities, vocabulary or language, and different ideas on each others' roles. Community Health Workers never have any more value that what they and others make of them. We can only work with people who are willing to ask others for help and actively participate in teamwork. This applies to other team members as well as the Community Health Workers.

Before going any further, let's talk about the most important person in this book: YOU! Remember that you are the main character and that only you can decide what is going to happen to your life after reading it. This might be the answer to some of those questions that you have had about your career in the health field and nobody could give you an answer.

I am Aurora Perales, a Community Health Worker, who wishes to remind you that life is a gift from God and that He gave each and every one of us a very special place here on earth. He gave you unique talents, a different goal in life, and a mind just as big and just as good as anybody else's. He meant for all of us to share our God given talents with the rest of humanity. He also meant for you to grow both physically and mentally and to reach your full potential in the health field. Remember, "Our Creator set you free to become the person you were meant to be" from the minute you were born.

You as an individual person, as a Community Health Worker are just as important as anyone else in the health care team. It is up to you and each one of us to begin today to have better regard for ourselves.

Each of us needs to get a better perspective of "self" and of our role. Say to yourself- I am a person (not a thing or a title), an individual with the same human rights as anybody else in the health care team. This will help you get a deep understanding of yourself and regain self-respect. You will be able to see that as a Community Health Worker you are accomplishing great things for yourself and others by sharing, caring and loving.

We (Community Health Workers) were meant to be here not only as individual persons but also as new professionals working with the other professionals in the health field. We are important- each in a different way, but nevertheless important, and WE ARE HERE TO STAY.

I see some of you think you are not a Community Health Worker. (See the definition of a Community Health Worker in the appendix of this book.) Regardless of what your present job title may be (Aide, Family Health Worker, Liaison Worker, Community Worker, etc.) you are already involved in the health care team, whether you realize it or not. You as a Community Health Worker have one of the most important parts in the making of a better care system. You can provide the rest of the health team members with information that affects the patient in getting proper health care.

You were trained to help <u>improve</u> the quality and quantity of health care already being given to the community people. Remember what we were before our training- people full of undeveloped potentials, talented, capable and curious, but needing direction and guidance. Can you remember HOW or WHY you became a Community Health Worker? Ten to one you have

already forgotten who made it possible for you and for all Community Health Workers to have a position in the health field. Have you forgotten that those same people whoever they may have been (Board members, nurses, doctors, administrators, legislators, etc.) that you might like or dislike, love or hate and respect or fear, are the same people that had faith in Community Health Workers to give us a chance to start a new profession. It was a chance to create our own job and a chance to grow in any direction we desired.

We still have that chance, and in the following pages you will find my personal experiences and recommendations, including aims, goals and "Ten Commandments" for Community Health Workers.

Let us review some of the health care ethics that you and I first encountered in our training and have helped broaden into more community based health care.

AIMS AND GOALS OF COMMUNITY HEALTH

1. To treat others with honor and dignity that befits them as human beings.

2. To treat others as you want to be treated, or as you would want your own family to be treated.

3. To be able to grow both physically and mentally and also to help our own people overcome some of the barriers in regards to health.

4. To learn the meaning of health (freedom from illness and a full, happy life).

5. To help the community people help themselves for as long as possible and to find the best resources for them.

6. To see that all community people receive the proper health care in accordance with their needs, by conveying the patient's problems to others in team (nutritionists, sanitarians, doctors, nurses, etc.).

7. To educate the health care team to community problems, in order for them to be able to give high quality health care to all 24 hours a day, with health programs to fit the needs of all the community.

AS HEALTH PROVIDERS WE BELIEVE THAT:

Patients are the most important persons in our work.

Patients are not dependent upon us; we are dependent upon them.

Patients are not an interruption of our work; they are the purpose of it.

Patients are human beings in need of help, who have individual likes, dislikes, and needs.

Patients do us a favor when they call for help; we are not doing them a favor when we serve them.

Patients are people who bring us their illnesses or problems. It is our duty to justify their faith in us.

Patients are deserving of the most courteous and attentive care we can give to them.

Following are Ten Commandments that I have developed for myself that enable me to function better while at work.

1. Thou shall not treat others as if they didn't exist. Patients and co-workers are people, highly individual, each with personal hopes, fears and problems. No one wants to be treated like a thing, a lump, a problem, or a number. All of us need to retain our self esteem, despite our personal problems.

2. Thou shall not treat your peers as if their jobs do not matter. Every job no matter how small in the health care team matters very much in protecting the patient's health. Learn to understand that we are all here for the same purpose and also try to understand and respect the job that is different than yours, whether your training has been longer, shorter, or more or less demanding than theirs. One should always admire people who do well in their job whatever it is they do.

3. Thou shall honor your job agreement. When you accepted your job, you made in effect, a treaty- an agreement with your agency to do certain things as well as you were able to, for certain wages. Your supervisors have every right to expect you to honor this agreement. Remember you chose to accept your job.

4. Thou shall not be late for work, nor abuse the coffee or lunch break, nor use the agency car for own personal pleasures or business, nor abuse the time allowed for home visits. In other words no "timely sins". You injure the rights of others when you disregard the basic rules.

5. Thou shall not during working hours act like a performer. You are not there to put on an act or a show for the patient or co-workers. Your job is to learn, listen and communicate. To show respect and concern for the patients problems and admire them for seeking your help.

6. Thou shall not contribute to the community grapevine. Never violate the confidence of your patient and your employer by contributing useless gossip to said grapevine. It is an efficient but fearful way of spreading all kinds of news.

7. Thou shall not carry on personal conversation with co-workers in front of patients: It only serves to confuse the patient.

8. Thou shall not remain ignorant of the real facts of health care today. You cannot assume that one person or one agency will take care of the whole patient and his/her problems. The well informed health worker is the one who learns not only the terminology used by professionals, but also the other resources available in the community to help you dispel many of the false notions that people have developed about health.

9. Thou shall not try to be a know-it-all. Learn to say "I don't know", and learn to work with team members, who can help you answer questions correctly and meaningfully to the patient.

10. Thou shall not dispense any medical information without proper backup or under any circumstances attempt to diagnose or prescribe medication or treatment. You will only disqualify yourself from the health care team, lose the respect of those around you and jeopardize the health of others.

QUEST FOR RECOGNITION

"The quest for recognition" may lead some Community Health Workers to see value in their jobs and to obtain a positive self-image, while it may lead others to become like a "Hollywood Set" in which only a front (a title) exists, with not enough props (skills) behind it to adequately support it.

In my opinion it is our behavior which cannot satisfy the need that motivates it. In other words, the way we act in seeking recognition can betray the very thing we want. If we try to just imitiate other health professionals, then our profession will never become a reality. Some of us are slowly learning not to be dominated by others. We are learning once again to take care of our needs and create our own work patterns to satisfy ourselves, as well as those around us. We are learning to take responsibility for our own work as well as that of our peers. Part of this is a revolution within ourselves. The part that is the hardest to accomplish is learning how to get recognition.

Traditionally we think of ourselves as being helpers or aides to other professionals in the health care team. With this frame of reference we have to look at our titles to determine our identity in the health field and act accordingly. Some of this is the fault of our supervisors, who worked so hard to become what they are that it is difficult for them to give up some of their knowledge, even that which others could be taught to exercise. The greatest fault, however, lies with each of us. As individuals we are committed to the goals of the revolution, but if we

continue to blame others for our faults, fail to speak up when we disagree, or ignore our abilities to assume responsibilities and the values of adequate education, then we destroy both ourselves and the revolution through our ignorance or carelessness.

We have relied on the doctors and nurses to speak on our behalf. Our importance in the health team has been ignored because we ourselves have failed to stand up and be counted as individuals who should be recognized by the health professionals.

Community Health Workers can, if they want to, educate themselves to take their place with the best, but how many of us will do it? That is the question many of us fail to ask ourselves once in a while. I personally think that education is an excellent idea for everybody who is working in the health field as Community Health Workers. Every one of us should ask ourselves just how much effort are we willing to make to qualify for the things we want from life. For example, how many of you are willing to give up certain pleasures that are important to you in order that you may have time to go to classes or to study your lessons?

Frankly, I believe that you are already putting your heart and soul into your work as a Community Health Worker or your progress within your agency would indicate otherwise. That to me is the whole story of success in a nutshell. If you can put your heart and soul in your work, you will succeed in accomplishing any goal you have set for yourself.

EDUCATION, MOTIVATION AND YOU

Education is a learning process. It also is the starting point toward whatever your goal might be. Remember that every professional, no matter how skilled, was once a beginner too. You set your own pace. You and only you can say at what level of education you can start. For example: ask yourself- Can I take notes, make outlines, do book reports, etc? Learning is something you have to do for yourself. The teachers will keep you supplied with instructional material, but the real effort must be made by you. In other words have patience with yourself too. Know what you are capable of doing before you start.

Motivation is the spark within you. It may mean the difference between sticking to or not sticking to your goal. To keep my motivation high I compiled a list of do's and don'ts for myself. I hope they will help you too.

1. Set your goals high, but divide them into steps that can be accomplished one at the time.

2. Don't take a bigger bite than you can chew (more classes than you can handle - two classes at the most to start with).

3. Your "point-of-view", is more important that that of others. It is important that you give yourself reassurance on the value of your education's progress and the worthwhile rewards awaiting you.

4. Don't <u>brood</u> long over a class which is hard and thus becomes a problem which can effect your work progress. All of us need guidance and encouragement at one time or another. Ask for help when you have a problem. You'll be surprised at the great satisfaction you'll get when solving it.

5. Keep informed about your field, take an interest in any information related to health or your job. Make it a habit to read any article published related to the subjects you are taking.

6. Set short range goals for yourself. For example, plan to finish a certain amount of credits by a certain date. Don't get discouraged if you don't. You have all the time in the world; set your own pace.

7. Don't try to compete with anyone except yourself.

8. Give yourself a reward when you get a good mark in your work (school is work). Treat yourself to lunch or go out with friends.

9. Keep in mind that nobody pushes you; you chose to do this. Make the most of this fine opportunity. Through your education, you will not only be helping yourself, but also your friends, relatives and others in need.

Let's take the problems that some Community Health Workers have in overcoming the fear and frustations regarding education. Some attend school only because they are obligated to by their supervisors; therefore, they find themselves unmotivated. Since they are trying to satisfy someone other than themselves they abuse the educational system. They waste their time in classes by talking or fooling around. They refuse to do their homework or participate in class discussions. In other words, they are unmotivated to learn. Then they turn around and blame their failure on the fact that instructors do not understand their cultures. This is one reason why we Community Health Workers are often looked upon as being ignorant and unable to speak for ourselves. Nothing is gained when we take a class to please someone else other than ourselves. Our need is to be personally well informed on community health.

Those of us who have the advantage of two languages and can master both have a better chance for job mobility. Therefore, take advantage of the education that is available. You must show interest, do your homework, practice your new knowledge both at work and at home. Have

faith in yourself and your abilities and you will accomplish what you want or need.

Book learning is different from the on-the-job training some of us had. It is a shock to some to find out we can conduct an excellent interview with a patient, but fail to record it adequately. We might have a gap in our knowledge such as how to fill out forms, take notes, make outlines, take tests or read and write effectively. Book learning can fill such gaps.

I don't want this to sound like a lecture, for that is not my intention. My one hope is to encourage you to keep on striving toward your goal whatever it may be. First and foremost you should talk about yourself to others. Remember you are not looking for classes or a curriculum that other professionals think we should have. We want to be adequate in our jobs and to achieve our own goals. We want the satisfaction of attaining these goals and meeting our own standards for achievement. Let your supervisor know about your decision to go to school. I know your decision will make excellent conversation. You'll be amazed how many people will be willing to help and advise you on what classes to take. Keep in mind that <u>you</u> are the one going to school. Advice is helpful but you make your own decisions.

I found it was easier to take classes related to my work because I was able to connect my book learning to real life situations. If you have decided to improve your skills with more education, your first step is to plan your work. Don't forget that going to school is part of

your work plan. In this manner you save time, effort and avoid problems.

Here's a plan that I developed that I hope you can use:

1. Schedule your time. A regular study period is a habit we should all develop. Make up a schedule for yourself and stick to it. At first it will seem a bit difficult to get back into the habit of studying especially if you have been away from books for some time. Your schedule might be a little difficult to follow at first, especially if you have a family, but keep at it. Remember that your mind needs exercise to limber up. Before you know it you will have the "hang of it."

2. The importance of learning how to study is another very important thing to do. Like speaking a foreign language, studying is hard, but it is not as difficult as it sounds once it becomes a habit and you know how to do it. If you have learned how to study you will stand a good chance of handling the information coming to you from all angles- new ideas, new discoveries, reports or facts both in school and at work.

   Study techniques are not the same for everybody. Methods that work for me might not help another person. Nevertheless, I will recommend some of the basics that have helped me.

   a. Concentrate on the material you have to learn. Set up at least an hour of study time before going to bed.

   b. Listen actively, take notes and ask yourself, "Is what I heard accurate?" Raise questions to clarify what you think you heard- to make the instructor support his/her position (opinion or fact).

   c. Budget your time. Stick to a specific study time.

   d. Don't fear exams (I always did). This fear is a waste of energy and also a headache for nothing. Look at exams as ways to discover your strengths and weaknesses in that area.

3. Don't be afraid to show your accomplishments or failures to others. Remember that you want to better your present skills and continue to grow with education.

By doing the above you will prove to others your strength in pursuing your own identity as a person first, and then your identity within the health field. Now you are ready to evolve (to develop gradually). Ask

yourself these three questions: "Who am I?" "Where am I going?" "How am I going to get there?" The first question is a simple one to answer: I am _____ and that's that. But is it? Go back and
(name)
think, "Who am I really? What am I doing about my personal life, my physical qualities and my place in this agency? How do I fit in? Do others respect me and my work, and if not, why don't they?" (Don't you think it is time for you to wake up and see the real you?) Don't blame others for your lack of understanding yourself.

After answering the first question ("Who am I?") your answer might look like this or something like this anyway. If it doesn't you may be in the wrong field.

> I am _____ a Community Health Worker, who likes to help people solve problems and who is ready and willing to educate the community people to ways to get better health care and also to educate the nurses and doctors to the community people and their needs.

You probably are not satisfied with just doing your job. You want to improve your skills or just plain grow in many of your present techniques. My purpose in having you do a self-evaluation test is to help you develop your present skills to a higher degree. By that I mean more education. (For a more complete self-evaluation test, forms are provided in the appendix of this book.)

"Where am I going?" By asking yourself this question you will decide what your goals will be. Do you want to become a better community worker,

a Community Health Worker, or maybe go on to higher education? The answer still depends on you. No one else knows what level of skills and education you have had. Nobody else knows what makes you happy, and if ten years from now you are still asking the same question, then you missed the point. You didn't bother to mark the route you were going to take, so you lost the way. As I said before, ask yourself and be honest: (You are only lying to yourself if you are not honest.) What kind of training do I need? What do I want out of life? Is my work satisfying my needs and the needs of those that need my help? Do I really need more education? If so, for what reason (my work, my future goal or for personal life style)?

"How am I going to get there?" How are you going to get to your destination is again your decision. When your sense of identity has reached a certain level of strength (the need to grow in knowledge) you will be able to look inwards and see what is there (education level and where starting point is). For example when I first took my self-evaluation test, I found out I could do three things: learn, improve, and accept. However, I also found out that to improve and accept others as they were, I had to improve and accept myself first. To improve myself I had to find out where I could start and to start I had to accept the fact that I had no high school education; therefore my own starting point toward higher learning was getting my high school diploma.

When I came to California in 1967 to live I felt alone and far from everyone and everything I had ever known. I was raised in a closed old fashioned atmosphere where to me Mexican people were doomed to be failures, working only as maids, aides, waitresses or out in the fields as migrant

workers. It was through my training as a Family Health Worker that I found a way to lessen my loneliness and satisfy my need for being with others of my own kind. I became involved in all kinds of unforgettable problems that gave me some knowledge of the achievements and failures of human beings.

So much of my learning was quite new to me. I realized that others besides Mexicans had problems and also needed to learn how to help themselves. I became aware that education was free for the taking and any person willing to grow in knowledge could do so with a little encouragement and lots of guts. To improve myself I had to face the fact that I needed to work to help support a family. I also needed to overcome the feeling that Mexicans were doomed to be failures. I could do both through more education.

I took advantage of my training and was able to accomplish the first two things that I needed to improve myself. Education was kind of hard to come by, because I only had one year to decide what kind of work I would be doing after my training.

I was not looking for material rewards, such as for pay or good grades but for the satisfaction of attaining my own personal goal. Here is a prayer by Father Melvin, C.SS.R. that a patient gave to me when I mentioned to her that I was afraid to continue my search for a career. I carry it with me to keep my spirits up when things are looking gray (when I feel that I'm failing or not accomplishing my goal). Perhaps it will help you get through some discouraging moments.

DEAR LORD, IN THE BATTLE THAT GOES THROUGH LIFE, I ASK FOR A FIELD THAT IS FAIR, A CHANCE THAT IS EQUAL TO ALL IN THE STRIFE, THE COURAGE TO DO AND TO DARE. AND IF I SHOULD WIN, LET IT BE BY THE CODE WITH MY MORALS AND FAITH HELD HIGH, BUT IF I SHOULD LOSE, LET ME STAND BY THE ROAD AND CHEER AS THE WINNER GOES BY.

How I started my educational process is very hard to explain, because some of my learning didn't come from books. It came from working side by side with other people- Community Health Workers, doctors, teachers, and nurses as well as through actual contact with members of the community who were in need of a helping hand. The following is a guide that I used to plan my educational goal:

STEP I I started by asking myself, "What will this training do for me? Will it help me get a job in the health field or in a different agency? Will it be of benefit if I decide to go for higher education?"

STEP II I wrote down everything I thought might help me to get a job after my year of training-- while at the same time thinking about my goal. For example, I wanted to become a nurse. My work came first so I took the classes that the system demanded of me, but I also asked and inquired about nursing school and the requirements.

STEP III I asked the other people (teachers, nurses, and doctors) what my chances were to get into this field.

STEP IV I went through my list and made a second list of all the things I needed to do to accomplish the things on my original list such as
- level of education I had. Where could I start to get my high school diploma?
- schools that offer nursing classes and the requirements to enter such programs.
- work- I needed a job that was either part time or would give release time for classes.

STEP IV (Continued)

- translation- knowing how to accurately translate technical learning from one language to another.

STEP V I looked at my second list and set priorities- which things I had to do first. My priorities were determined by three factors: My family, my work and level of education I had.

STEP VI I hunted for resources to help me get my high school diploma first and found the following:

1) Adult Education. This agency offered classes for what I needed, but it would take me three years to complete high school.
2) G.E.D. (General Education Developmental) Tests for high school equivalency. These tests could be taken with a minimum of preparation and I could take them or repeat them as I felt ready. (See appendix for G.E.D. Information sheet).
3) Community College. As an adult I could also enter a community college without a high school diploma and apply credits toward completion of high school. (I was able to enter community college classes but decided to take the G.E.D. Tests at the same time for my high school diploma so these college credits could apply toward an Associate degree.)

Once in the community college I could apply to the 2 year Registered Nurse program or to the 18 month Licensed Vocational Nurse program.

STEP VII I completed my agency based training as a Family Health Worker and then continued classes in the Community Health Worker Certificate Program at West Valley College. After getting my Certificate, I went on to complete an Associate degree in Human Services. I am now qualified to work as a Community Health Worker in many health related agencies and can if I choose in the future go on to a higher degree.

I know I have come a long way and it has taken me a long time to get what I set out to accomplish. I took one step at a time and hope that all of you will have as much success in reaching your goal.

CONCLUSION

The future mobility and utilization of Community Health Workers will be greatly affected by how rapidly Community Health Workers can start tackling the truly centralized problem of getting recognition in our role. Getting recognition for Community Health Workers as a whole is something we all need. However in order to do this, it takes teamwork and everyone must do their part. You can do your part by doing the following:

1. Get together as a group (I mean outside of your agency) and make decisions; decisions have to be made by Community Health Workers or they won't be effective. How many of you belong to a group outside of your agency that is made up of only Community Health Workers? How many of you are helping those who are fighting for Community Health Workers' rights? I know that almost all of us are members of some sort of team. Why not form a team of Community Health Workers if you don't have one already? If you do have one already within your agency, then start one county wide, and afterwards try joining with the California State Association of Community Health Workers. This Association was started by Community Health Workers for Community Health Workers and therefore should be controlled by Community Health Workers. Any council or organization you join needs your participation and not just your money. If you cannot always attend, then you should personally choose your representative. Besides the State Association, another organization that Community Health Workers can join is the American Public Health Association through the New Professionals Section.

2. Pick a title and stand by it! Some prefer the umbrella title "Community Worker." Others of us will fight to keep the Community Health Worker title because it sets us apart from other people in community based occupations. Many workers deal in general with some type of community service, including the mailman, the gardener and the Avon lady. Therefore I know that having the title of Community Health Worker lets everyone know that I deal specifically with the health problems in the community.

3. Speak up on the way your inservice time is being used. You can encourage your agency to use some or all of your inservice time in specific training for Community Health Workers, with the possibility of getting college credit.

4. Find a curriculum that meets the needs of Community Health Workers. That means one that deals with things that Community Health Workers need:

   1) Job related learning. This meets the biggest need of Community Health Workers and that is to learn how to better meet the health needs of the community people they serve. This type of learning also does an amazing thing for individual health workers. It shows them that learning through education can relate to your everyday life - your work, your family, and everything in your life. This understanding about learning is a key to open future doors to your own growth and mobility. It also helps immediately because you stay employed and keep both feet "where the action is." As a Community Health Worker you are more hirable later if you work and study at the same time rather than quitting school to get college credentials.

   2) College credit for career advancement. College credit will help us in job mobility, recognition and becoming accountable for ourselves as a profession. It is a ticket, and a very useful one to let us into jobs and into community resources to help the people we serve. As Community Health Workers we need a combination of both college credit and job related learning. Without these 2 we cannot combine the two languages we need as Community Health Workers: 1) community (relating real life experience) and 2) book learning (a standard body of facts such as health knowledge). A curriculum for Community Health Workers should have input from Community Health Workers and should be taught by people who have worked with Community Health Workers and understand their needs. I strongly recommend a curriculum like the one at West Valley Community College. It has met the immediate educational needs of Community Health Workers and it has also served as a way for Community Health Workers to identify with one general title for their role. I recommend that Community Health Workers in other areas try to get a similar curriculum by getting together with other Community Health Workers, finding supervisors who will support them and might be possible teachers, and then approach the local community college. (For further information, have your supervisor or trainer write for a copy of the Community Health Worker Program Manual.)

5. Show accountability for your own work and then with others in your agency, county and state for how many Community Health Workers are working and how much work they are doing. This accounting of ourselves is necessary to improve utilization of Community Health Workers, influence hiring and pay of Community Health Workers and standarize our title and training.

6. Build unity and spirit among all Community Health Workers by monthly newsletters (such as the one published by the Community Workers in Santa Clara County), workshops and potlucks. This will especially help those Community Health Workers with no hope of improving their own mobility, because of dead-end or locked-in jobs. These Community Health Workers are found in many different situations working for private agencies, federal grants or public agencies.

7. Get involved in day to day operations of the agencies by being in on decision making regarding policies affecting Community Health Workers. Actively participate on the following:

   A. Hiring boards-- who gets hired can affect the progress done so far by other Community Health Workers.

   B. Advisory and policy committees for getting a curriculum started, getting federal grants, writing job descriptions and writing budget proposals, etc.

   C. Health care planning and coordination committees.

8. Support those Community Health Workers who have the ability and the potential to be leaders of Community Health Workers. They can (if given the support of all) find ways for us to have mobility, career ladders, and better working relationships with the total system of health care. Leaders are supposed to meet the needs of their co-workers. Our needs at the present time are: negotations for better wages, for mobility, for career ladders and for being on all kinds of advisory boards and committees that might affect our work. It is important that the people chosen to be our leaders are themselves successful Community Health Workers who <u>like</u> being Community Health Workers. This may not be the person with the most education or the most ambition. Change does not come from those who cannot relate or identify their own future with that of Community Health Workers. Therefore my advice is for those individuals who are determined to stay and fight for what they believe to choose good leaders and work with them.

For these eight reasons I strongly believe, not only as a Community Health Worker but as an individual in the health field, that unless we help each other and give all Community Health Workers an equal opportunity, we will obstruct our own progress.

It is my understanding from working as a Community Health Worker with other Community Health Workers in the last few years that we have the lowest of everything - wages, title, education and yes, the lowest position in the health field. I see all of this, but I also remember our promise that we could create a real change in the delivery of health care, especially for those left out (the minority and the poor).

That promise has not been completely fulfilled. We have made some changes, but our profession is immature although promising. Community Health Workers have a lot of work to do, but in my opinion the investment will be well worth it. The system will be changed if we as Community Health Workers really do our jobs.

In agencies that remain the same and whose rules have not changed, Community Health Workers have failed to educate the other health providers in helping community people get better health care through the type of expanded health teaching that Community Health Workers do. Therefore our status has not changed, our titles stay the same, and our talents, ideas and abilities have been ignored. Another factor is that some Community Health Workers lack the ability to speak up when they see a peer slacking up. I agree that Community Health Workers have a difficult task, and I know that many are working hard in accomplishing the necessary methods for changing the health system to make a significant impact on the community people. Only a few doing their job is not enough. They too need our support.

I KNOW IT IS A CHOICE NOT A REQUIREMENT FOR EVERY INDIVIDUAL TO PLAN THEIR OWN DESTINY, BUT COMMUNITY HEALTH WORKERS MUST PLAN TOGETHER IF WE WANT CHANGE. EVERY COMMUNITY HEALTH WORKER HAS A RIGHT AND A DUTY TO BE INVOLVED IN PLANNING THE DESTINY AND THE FUTURE OF ALL COMMUNITY HEALTH WORKERS.

AURORA RODRIGUEZ PERALES

APPENDIX

Community Health Worker Pledge

Self Evaluation Forms
- -- "I Am"
- -- "Self Evaluation for Work Situations"
- -- "What Do I Want?
- -- "Education Questionnaire"
- -- "Questions to Ask When Exploring an Occupation"
- -- "The Time of Your Life - 24 Hours a Day"

Community Health Worker Job Description

Definition of Community Health Worker Title

West Valley College
- -- Community Health Worker Certificate Program
- -- Associate Degree in Human Services

General Education Development Tests (G.E.D.)

Recommended Readings

COMMUNITY HEALTH WORKER
PLEDGE

I sincerely pledge myself before God
and in the presence of this assembly:

To devote my life to using the gifts
and developing the talents he has given
me to help those in need of a helping
hand.

With loyalty to my fellowman I will
aid the rest of the health team members
in maintaining the physical and mental
well being of the community people.

I will do my best to retain all family
affairs coming to my knowledge in confidence.

I will strive dutifully and conscientiously
to fulfill my tasks to the best of my
abilities, and to support and improve the
standards of my belief in extending
a helping hand.

Aurora Perales, CHW
and
Hattie Ellison, CHW

I AM:

INSTRUCTIONS: Fill in the blanks carefully and honestly. Avoid trying to please others by your answers; remember that you are talking about yourself.

1. Three things I would like to say about myself:

   A. _____

   B. _____

   C. _____

2. Three things I would like others to say about me:

   A. _____

   B. _____

   C. _____

3. One thing that I do now/or have done in the past that I'm proud of:

   _____

4. One special skill that I have that sets me apart from others:

   _____

5. I want and I need:

   _____

   _____

   _____

6. One thing I will do to please myself:

   _____

7. One person that I admire and why:

   _____

   _____

SELF EVALUATION
FOR
WORK SITUATIONS

Evaluating the importance of "Who I am" and "What I am" questions relating to work will help you rate yourself on how you get along with others. Answer the questions honestly by checking the column that best describes you.

When I am at work with others I:	Often	Sometimes	Not Usually	Not At All
1. Prefer to be a leader	___	___	___	___
2. Only listen to what I want	___	___	___	___
3. Try to follow the rules	___	___	___	___
4. Volunteer my advice when needed	___	___	___	___
5. Only do what I'm told and nothing else	___	___	___	___
6. Get asked to do other duties besides my own	___	___	___	___
7. Make others feel comfortable	___	___	___	___
8. Make others feel needed	___	___	___	___
9. Participate in group discussions	___	___	___	___
10. Do not accept peer decisions if they are different than mine	___	___	___	___
11. Try to encourage others to ask for help	___	___	___	___
12. Try to get my ideas across without having to force others	___	___	___	___
13. Critize others in their work	___	___	___	___
15. Like being the "Center of Attention"	___	___	___	___

Self Evaluation (Con't)

When I am at work with others I:	Often	Sometimes	Not Usually	Not At All
15. Resent those who ask for help	___	___	___	___
16. Like my work and my title	___	___	___	___
17. Like to work by myself	___	___	___	___
18. Ask for advice when needed	___	___	___	___
19. Sacrifice my own comfort for others	___	___	___	___
20. Know what's expected of me	___	___	___	___
21. Think I know better than supervisors	___	___	___	___
22. Know that I need guidance	___	___	___	___
23. Learn by my own mistakes	___	___	___	___
24. Express myself with good vocabulary	___	___	___	___
25. Avoid gossip	___	___	___	___
26. Respect those that have more knowledge	___	___	___	___
27. Prefer to work with children or teenagers	___	___	___	___
28. Prefer to work with adults	___	___	___	___
29. Like doing home visits	___	___	___	___
30. Do my work without complaining	___	___	___	___

WHAT CAN YOU CONCLUDE FROM YOUR RESPONSES? IS THERE A CHARACTERISTIC PATTERN AND/OR ANY CONTRADICTIONS? WHAT ARE YOUR STRENGTHS?

WHAT DO I WANT?

1. What is the most important thing thing I always wanted out of life?

2. Who or what is keeping me from getting it?

3. What I am willing to do or give up in order to get what I want?

4. What do I want from others (friends, loved ones, etc.)?

EDUCATION QUESTIONNAIRE

1. Who am I? (Your personal as well as your physical qualities)

2. Where am I going? (Your goals and objectives)

4. How am I going to get there? (What do I need to reach my goals: Requirements in terms of experience or training, what kind of classes I need to take, if any)

QUESTIONS TO ASK WHEN EXPLORING AN OCCUPATION

For all kind of occupations you should know:

1. What duties are involved?
2. What skills are needed?
3. How much interest do you have in this occupation?
4. What schooling is required or does previous job training qualify you?
5. Is job senority a factor in advancement?
6. Is hiring preference given to minorities?
7. Will you be working with others or alone?
8. Are you expected to perform your duties under supervision?
9. What is the starting pay and salary range and does this include other forms of compensation- mileage, use of car, telephone, etc.
10. What are requirements for higher advancement (career ladder)?
11. How many workers have actually succeeded in getting advancements in this field?
12. To what other occupations could I apply similar abilities, interest and experience?
13. What social and physical characteristics are needed to actually succeed in this field?
14. Has there been any discrimination in regards to <u>age</u> and <u>sex</u> in this field if so, to what extent?
15. What kind of benefits are available to employees in this field (health and life insurance, social security, state disability, unemployment insurance, dental plan, retirement)?

THE TIME OF YOUR LIFE
24 HOURS A DAY

Instructions: Answer questions yes or no

	YES	NO
1. Do I use my time well?	___	___
2. Do I plan my time?	___	___
3. Do I do things on the spur of the moment?	___	___
4. Do I meet deadlines?	___	___
5. Do I make good use of odd times and unplanned delays?	___	___
6. Do I remember what has to be accomplished each day?	___	___
7. Do I allow time to do each task?	___	___
8. Do I plug along and take the time I want for each task?	___	___
9. Do I waste time when there is "nothing to do?"	___	___
10. Do I set some time for myself?	___	___
11. Do I steal some time from tomorrow (by putting things off)?	___	___
12. Am I living all the time in a rush?	___	___

Conclusions:

A. What can I do to budget my time?

B. How many hours do I plan to give to each of these:

1) Work_____ 2) Family_____ 3) Sleep and Rest_____ 4) Myself_____
(Reading, Studying, Time alone)

WEST VALLEY COLLEGE
14000 Fruitvale Avenue
Saratoga, California 95070
(408) 867-2200

COMMUNITY HEALTH WORKER

What Is A Community Health Worker?

Community Health Workers help people get better health care. They act as bridges between health services and people needing the services by using their training in health information and skills as well as their own life experiences. Community Health Workers are specifically trained in

1. Health Care advocacy
2. Clinical skills
3. Health teaching

The Community Health Worker makes a unique contribution to the health care team and is often the primary spokesman on behalf of the recipients of health care. The various responsibilities of the job require a focused ability to listen to others as well as skill and initiative in communicating information to them according to the needs of the situation.

The Community Health Worker can

1) directly use health care provider skills in helping people
2) refer to other sources of help for health needs
3) share information with other health team members
4) teach people to help themselves through preventive health measures

Where are Community Health Workers Employed?

Public service agencies involved in health care utilize Community Health Workers in a variety of roles. West Valley College has structured a generalized certificate program which offers training in human services skills and health skills which can be used immediately in different agency and home setting decreasing the need for extensive in-service training by the agency. Community Health Workers are currently working with families in public health agencies, in family planning clinics, in home nutrition outreach, in outpatient medical clinics, and with children in day care centers and school health programs.

What Does the West Valley College Community Health Worker Program Include?

The college offers a 30 semester unit certificate program with two phases -- human services classes and health skills classes -- as well as the opportunity to apply these units toward an Associate Degree. The basic human services classes in the core curriculum are taken with students from other public service fields such as social service and mental health. The health skills classes are fully credited courses in health concepts, clinic assisting, adult health, maternal-child care, family functioning and health teaching.

What are the Pre-Requisities to Enter the Program?

The main focus of the Community Health Worker program has been to train people already employed by health care agencies in order to improve the quality of their work and enable them to achieve career mobility. The program is also open to those seeking employment in community health, even if they do not have a high school diploma or have been out of school for a while. There are no entrance exams, and successful completion of required courses indicates an ability to continue in the program.

PHILOSOPHY AND DESCRIPTION OF COMMUNITY HEALTH WORKER ROLE

Definition of "Community Health Worker" Title *

Perhaps the easiest way to explain the title "Community Health Worker" is by specifying what is implied by each of the three words forming the title.

Community - It is significant that the first word in the title stresses the importance of having someone from the community or population being served actually fill this role. The Community Health Worker is above all a patient advocate, a spokesman and a facilitator, seeking to get improved health care for individuals and families. Being from the population served by a particular health care team or agency enables the Community Health Worker to immediately increase the availability and accessibility as well as the relevance of whatever health care is available. Potential barriers such as cultural and language differences, local customs and values, informal communication systems, and decision making styles are turned into avenues which increase the amount and quality of health care that actually affects the lives of people.

Sometimes the first word used in the title is some other people-oriented term, such as in "Family Health Worker" and "Child Health Advocate". All these words emphasize that this role starts with people in their current life experience, rather than having this orientation as a goal or extra component of the role. These terms also imply some degree of flexibility and mobility attached to the role, for Community Health Workers as health advocates must go where the people are, within a particular agency or in the community at large.

Other meanings of the "Community" part of the title include the requirement that Community Health Workers possess a sense of common need and purpose with the other human beings who are their friends and neighbors. Along with this awareness, people selected to serve as Community Health Workers should also have a basic ability to communicate with others and a functional belief in an individual's rights and responsibilities to be involved in personal and family health care decisions.

Most members of the health care team possess or value the above personal qualities, but often they have other priorities which interfere with their spending much time or energy with the basic human needs and qualities of the people they serve. They are trained and under obligation to save lives, oversee the health of large groups of people and make decisions based on available funds,

* Reprinted from Community Health Worker Program Manual, published 1973 by the Community Health Worker Project, funded by Health Services Education Council and Regional Medical Programs. Grant based at West Valley College, Saratoga, California.

personnel and facilities. The Community Health Worker exists first to help the whole person, and then to minister to separate needs such as for specific health teaching or care during illness.

Health - Without the "Health" part of the title, the Community Health Worker would be a community spokesman to the health care team but could give little direct or focused health services to the patient. This middle word in the title implies some training in health care facts and processes beyond what is commonly known by lay people with similar life experiences. It also specifies the areas of concern in which a Community Health Worker tries to help others. While general trust, communications and shared culture are the starting point, Community Health Workers have specific skills so they can help people toward better health.

It is at this point that the Community Health Worker role overlaps and relates with the roles of other health care providers. Probably the largest part of the role is focused on the Community Health Worker as a health teacher who explains health terms and current alternatives to patients. The other main part of the role is in direct care similar to that given by other entry level health care providers. Community Health Workers are trained to do such health tasks as preparing patients for examinations, explaining medications and procedures, doing wound dressings and performing basic laboratory tests. It is this health care component that differentiates Community Health Workers from social service technicians or mental health workers.

Differentiation of Community Health Workers from other health care providers is focused mainly on work site, types of employing agencies and amount of traditional medical training. Community Health Workers are employed mainly in outpatient facilities and community agencies. They only work with inpatient hospital or extended care facilities within roles such as patient advocate or in clinic assisting.

Many Community Health Workers are also employed as certified Home Health Aides in a combined role function, but direct home care of diagnosed patients is not generally a defined part of the Community Health Worker role. In clinic assisting situations, Community Health Workers are utilized more in direct patient assisting, such as during physical examinations, explanations and patient flow than in clinic management, billing, administering medicines, or the filing and routing of patient records. Thus they are different from both medical assistants and medical records technicians even though they often have similar responsibilities in clinic work and recording patient information.

Worker -- Although this word does not fully convey the contribution of this role to individual and family health care, it is preferred to terms such as "aide" or "assistant". The Community

Health Worker is developing into a separate distinct role on the health care team and is not a lesser or watered down version of any other role. In order to avoid this implication, some agencies use stronger terms such as "Family Health Coordinator" or "Patient Care Manager". However, these terms seem to imply agency responsibilities which are not uniformly given to Community Health Workers. Other titles such as "Patient Advocate" and "Community Health Liaison" are also used. While time is required to explore and define the meanings of these terms, some similar title may eventually be adopted. Until that time, the overall name "Community Health Worker" seems to be the one most generally applicable to the role as well as the title most acceptable to people in the role.

Community Health Worker Certificate Program
West Valley College

Human Services Core Classes

Sociology 10 Use of Community Resources 3 units
Designed to help the student effectively use community resources personally or on behalf of clients. Covers structure and function of community agencies and resources, and techniques of referral and follow-up.

Speech 4 Introduction to Small Group Discussion 3 units
Focuses on improvement of basic communication skills in 1:1 and small group setting, including interaction, information sharing and decision making.

Psychology 12 Human Growth and Development 3 units
Covers human psychological development from birth through old age. Emphasis is on normal psychological growth and development relative to social and ethnic factors.

Health Skills Classes Prerequisite: Interview with Community Health Worker Coordinator or Community Health Worker Counselor

Health Education (Modules 2B and 2D) 2 units
2B Drug Use and Misuse: Knowledge of effects and use of drug, alcohol and tobacco.
2D Disease and Environment: Personal health maintenance and environmental health.

Health Education 3 First Aid 1 unit
Basic course in standard first aid techinques and civil defense procedures. Red Cross First Aid certificate included with successful completion. Includes practice of first aid skills and emergency procedures.

COMHL 10 Introduction to Community Family Health 3 units
Stresses basic areas of knowledge and skills required in community health care including liaison work, observation, family health follow-up on current health problems, including chronic illness (e.g., Diabetes, heart disease, emphysema) and contagious disease (e.g., tuberculosis and venereal disease).

COMHL 11 Community Health Clinic Skills 3 units
Prepares the student to perform basic clinical procedures in supervised home care, in school health programs and in outpatient community health clinics. Includes dressing changes, wound care, vital signs, inhalators and application of heat and cold. Stresses health teaching and explaining medical instructions. Practice is provided in preparing the patient for physical examinations, taking a health history, assisting with basic procedures, doing routine screening tests, and the sterilization and ordering of supplies and equipment.

COMHL 12 Childbearing and Child Spacing 2 units

Focuses on child spacing, planning for childbirth, parent roles, family relationships and maternal infant care as seen in the home, outpatient and community setting. The emphasis is on normal physical processes and related cultural, psycho-social and emotional factors. Prepares the student to do health teaching, observation, and follow-up on the childbearing process and family planning.

COMHL 13 Child Health 2 units

Focuses on child health in home, school and outpatient settings. Emphasizes skills in observation and health teaching related to child health and development. Includes approaches to parenting, nutrition and dental needs, care of childhood illnesses, accident prevention, immunizations and learning problems and physical handicaps.

Health Related Work Experience Credit 8 units

Units given for concurrent health related work experience. Students must take at least four (4) academic units and be employed in health related work.

TOTAL: 30 Semester units

WEST VALLEY COLLEGE
Community Health Worker Certificate Program
(Credits applicable to A. S. Degree with Human Services Major)

West Valley College offers a 30 unit certificate program that is designed to prepare Community Health Workers to use effective techniques in health care advocacy, clinical skills, and health teaching. The program emphasizes both Human Service Skills and Health Care Skills. 1) Human Service study includes one to one and group communication, community resources, and the psychology of human development. 2) The focus in Health Skills is on the prevention of health problems, health team approaches to common illnesses, chronic conditions and the liaison role of the Community Health Worker in outpatient, school and home settings.

Certificate Program:

First Semester	Semester Units
Use of Community Resources (Soc 10)	3
Health Education Modules (H-Ed 2B and 2D)	2
First Aid (H-Ed 3)	1
Community Family Health (Comhl 10)	3
Childbearing and Child Spacing (Comhl 12)	2
Health Related Work Experience	4
	15

Second Semester	
Introduction to Small Group Discussion (Spch 4)	3
Human Growth and Development (Psych 12)	3
Child Health (Comhl 13)	2
Outpatient Clinic Assisting (Comhl 11)	3
Health Related Work Experience Credit	4
	15
TOTAL SEMESTER UNITS FOR CERTIFICATE ---------	30

Additional Courses for A. S. Degree:

Third Semester	
English Composition (Eng 50, 58A, or 1A)	3
History Series	4
Social Problems (Soc 2)	3
Nutrition (FDRST 62 or FLS 15)	2-3
*Elective	3
P.E. Activity	1
	16-17

Fourth Semester	
Ethnic Studies Course (e.g., Soc 12)	3
Humanities (General Education)	2
Math 50 (or equivalent)	3
*Health Related Elective	3
*General Elective	4
P.E. Activity	1
	16
TOTAL SEMESTER UNITS COMPLETED ----------	62-63

GENERAL EDUCATIONAL DEVELOPMENT TESTS (G.E.D.)

Sample description from: Santa Clara County, Office of Education Guidance Department

1. The G.E.D. (General Educational Development) tests are intended to assist in obtaining a high school diploma. Your high school or adult school principal can tell you what else you must do to qualify for a high school diploma.

2. Many employers, such as civil service officers, personnel officers for public utilities and transportation companies, and others will accept passing scores of the G.E.D. test as equivalent to a high school diploma. If you need a high school diploma in order to get a specific job, CHECK WITH YOUR EMPLOYER FIRST to determine if he will accept G.E.D. test results. (You may save yourself a great deal of trouble and disappointment by checking first.)

3. Fee-- There is a charge of $5.00 for the complete battery of tests, payable prior to taking the first test.

4. Eligibility -- Anyone eighteen years of age and older may take the tests. Pre-registration is required.

5. The G.E.D. Tests consist of multiple-choice items. You do not have to write your answers; just select the answer you think is correct. There is only one correct response for each item. These examinations cover:

   Test #1 - Correctness and Effectiveness of Expression
   Test #2 - Interpretation of Reading Materials in Social Studies
   Test #3 - Interpretation of Reading Materials in the Natural Sciences
   Test #4 - Interpretation of Literary Materials
   Test #5 - General Mathematical Ability

   Time allowance for each test is two hours. No more than one test should be taken in a single afternoon.

   Generally accepted as a minimum satisfactory score is an average standard score of 45 for the five tests with no single score lower than 35. The tests are standarized nationally on graduating high school seniors and are used to measure educational achievement of adults who are not high school graduates. The Departments of Adult Education in Santa Clara County use the tests as a part of their high school diploma programs, but they do not issue a diploma on the basis of test scores. The Santa Clara County Office of Education has no authority to grant credit toward a high school diploma. Contact your local high school district of residence if you intend to apply the test results toward a high school diploma.

The Santa Clara County Office of Education will issue a form giving test results to a potential employer or a governmental agency upon request of the person taking the test. It will also issue a Certificate of Equivalency to all who perform satisfactorily on the tests.

6. TESTING DAYS AND TIMES ARE AS FOLLOWS: Monday through Friday - 2:00 p.m.
100 Skyport Drive, San Jose

RECOMENDED READINGS

Community Health Worker Program Manual. Published 1973 by the Community Health Worker Project, funded by Health Services Education Council and Regional Medical Programs. Grant based at West Valley College, Saratoga, California.

* Note:
All West Valley College publications available through the Viking Bookstore, 14000 Fruitvale Avenue, Saratoga, California 95070. (408) 867-2207

Community Health Worker Health Skills Workbooks, West Valley College, Saratoga, CA :

Health Concepts. Walters, Esperanza and Washington, Jackie.
Community Family Health. Washington, Jackie and Kelkenberg, Sharon.
Community Health Clinic Skills. Walters, Esperanza.
Childbearing and Child Spacing. Rice, Alison; Hill, Charla and Washington, Jackie.
Child Health. Hill, Charla and Washington, Jackie.

Hostrop, Richard W. Ed. Handbook for Achieving Academic Success. Homewood Illinois: Richard D. Irwin, Inc., 1971.

Koch, Harry Walter. Civil Service Quizzer and Guide. San Francisco: The Ken Books, 1971.

McHenry, Gary. Ed. Health Occupation Training Programs (in Monterey, San Benito, San Mateo, Santa Clara, and Santa Cruz Counties). San Jose, California: Health Services Education Council, 1974.

Pearlman, Daniel D. and Pearlman, Paula R. Guide To Rapid Revision. New York: The Odyssey Press, 1965.

Romine, Jack S. Mastering College English. Englewood Cliff, New Jersey: Prentiss - Hall, Inc., 1967.

Turner, David R. High School Equivalency Diploma Tests. New York: Arco Publishing Co, 1970.

Brochures and Pamphlets

"How to Pay For Your Health Career Education"
A Guide for Minority Students., DHEW Publication No. (HRA) 74-8, U.S. Department of Health Education and Welfare, Public Health Service, Health Resource Administration.

"200 Ways to Put Your Talent To Work In The Health Field". National Health Council, Inc., 1740 Broadway, New York, New York 10019.

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